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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jacek Stachurski et al.
Serial No: 09/668,844
Filed: 9/22/2000
Art Unit: 2654
Examiner: Lerner
Docket No.: TI-29492
Conf. No.: 2444
Customer No.: 23494

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<input type="checkbox"/> CONTINUATION APP'N	
<input type="checkbox"/> DIVISIONAL APP'N	
NAME OF INVENTOR(S): Jacek Stachurski et al.	
RECEIPT DATE & SERIAL NO.: Serial No.: 09/668,844	
TITLE OF INVENTION: Hybrid Speech Coding and System	
Filing Date: 9/22/2000	
Conf. No.: 2444	
TI FILE NO.: TI-29492	DEPOSIT ACCT. NO.: 20-0668
FAXED: 08/30/2005	
DUE: 09/07/2005	
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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) TI-29492
CERTIFICATE OF MAILING OR TRANSMISSION (37 CFR 1.8(a)) I hereby certify that this correspondence is being: <input type="checkbox"/> deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop Petition, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 <input checked="" type="checkbox"/> transmitted by facsimile to the United States Patent and Trademark Office at (703) 872-9306 on <u>8-30-05</u> Signature <u>Gracia Sansom</u> Type of printed Name <u>Gracia Sansom</u>		In re Application of Jacek Stachurski et al. <hr/> Application Number 09/668,844 Filed 9/22/2000 <hr/> For: Hybrid Speech Coding and System <hr/> Art Unit: 2654 Examiner: Lerner
Applicant hereby appeals to the Board of Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$500.00 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: _____ <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 20-0668 . I have enclosed a duplicate copy of this sheet. <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.38(a) (PTO/SB/22) is enclosed. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>29934</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		
Signature <u>Carlton H. Hoel</u> Typed or printed name Carlton H. Hoel Telephone Number (972) 917-4365 Date <u>8/29/2005</u>		Signature _____ Typed or printed name _____ Telephone Number _____ Date _____
NOTE: Signatures of all inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		

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